

## HCPC approval process report

Education provider	De Montfort University
Name of programme(s)	BSc (Hons) Paramedicine (Apprentice Pathway), Full time
Approval visit date	17 November 2020
Case reference	CAS-15736-Y5K6B9

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### Executive Summary

We are the Health and Care Professions Council (HCPC), a regulator set up to protect the public. We set standards for education and training, professional knowledge and skills, conduct, performance and ethics; keep a register of professionals who meet those standards; approve programmes which professionals must complete before they can register with us; and take action when professionals on our Register do not meet our standards.

The following is a report on the approval process undertaken by the HCPC to ensure that programme(s) detailed in this report meet our standards of education and training (referred to through this report as 'our standards'). The report details the process itself, the evidence considered, and recommendations made regarding programme approval.

## Section 1: Our regulatory approach

### Our standards

We approve programmes that meet our education standards, which ensure individuals that complete the programmes meet proficiency standards. The proficiency standards set out what a registrant should know, understand and be able to do when they complete their education and training. The education standards are outcome focused, enabling education providers to deliver programmes in different ways, as long as individuals who complete the programme meet the relevant proficiency standards.

Programmes are normally [approved on an open-ended basis](#), subject to satisfactory engagement with our monitoring processes. Programmes we have approved are listed [on our website](#).

### How we make our decisions

We make independent evidence based decisions about programme approval. For all assessments, we ensure that we have profession specific input in our decision making. In order to do this, we appoint [partner visitors](#) to undertake assessment of evidence presented through our processes. The visitors make recommendations to the Education and Training Committee (ETC). Education providers have the right of reply to the recommendation of the visitors, inclusive of conditions and recommendations. If an education provider wishes to, they can supply 'observations' as part of the process.

The ETC make decisions about the approval and ongoing approval of programmes. In order to do this, they consider recommendations detailed in process reports, and any observations from education providers (if submitted). The Committee meets in public on a regular basis and their decisions are available to view [on our website](#).

### HCPC panel

We always appoint at least one partner visitor from the profession (inclusive of modality and / or entitlement, where applicable) with which the assessment is concerned. We also ensure that visitors are supported in their assessment by a member of the HCPC executive team. Details of the HCPC panel for this assessment are as follows:

Matthew Catterall	Paramedic
Jennifer Caldwell	Occupational therapist
Temilolu Odunaike	HCPC executive

### Other groups involved in the virtual approval visit

There were other groups involved with the approval process as follows. Although we engage in collaborative scrutiny of programmes, we come to our decisions independently.

Lisa Wakefield	Independent chair (supplied by the education provider)	De Montfort University
Sophia Welton	Secretary (supplied by the education provider)	De Montfort University
Keith Bromwich	External Advisor	University of Gloucestershire
Andrew Wright	University panel member	De Montfort University
Tasmin Raynor	University panel member	De Montfort University

Benjamin Smith	Student Representative	De Montfort University
Jenny Coombs	University panel member	De Montfort University
Rebecca Thirlby,	University panel member	De Montfort University
Joe Di Micco	Observer	De Montfort University

## Section 2: Programme details

Programme name	BSc (Hons) Paramedicine (Apprentice Pathway)
Mode of study	FT (Full time)
Profession	Paramedic
Proposed First intake	01 May 2021
Maximum learner cohort	Up to 20
Intakes per year	2
Assessment reference	APP02184

We undertook this assessment of a new programme proposed by the education provider via the approval process. This involved consideration of documentary evidence and a virtual approval visit, to consider whether the programme meet our standards for the first time.

## Section 3: Requirements to commence assessment

In order for us to progress with approval and monitoring assessments, we ask for certain evidence and information from education providers. The following is a list of evidence that we asked for through this process, and whether that evidence was provided. Education providers are also given the opportunity to include any further supporting evidence as part of their submission. Without a sufficient level of evidence, we need to consider whether we can proceed with the assessment. In this case, we decided that we were able to undertake our assessment with the evidence provided.

Type of evidence	Submitted	Comments
Completed education standards mapping document	Yes	
Information about the programme, including relevant policies and procedures, and contractual agreements	Yes	
Descriptions of how the programme delivers and assesses learning	Yes	
Proficiency standards mapping	Yes	
Information provided to applicants and learners	Yes	
Information for those involved with practice-based learning	Yes	
Information that shows how staff resources are sufficient for the delivery of the programme	Yes	
Internal quality monitoring documentation	Not Required	Programme is new and has not run yet.

Due to the COVID-19 pandemic, the education provider decided to move this event to a virtual (or remote) approval visit. In the table below, we have noted the meeting held, along with reasons for not meeting certain groups (where applicable):

Group	Met	Comments
Learners	Not Required	As this was a virtual visit and, because the visitors did not have areas to address with this group, we decided that it was unnecessary to meet with them.
Service users and carers (and / or their representatives)	Not Required	As this was a virtual visit and, due to the impact of Covid-19 pandemic, it was not possible to meet with this group.
Facilities and resources	Not Required	As this was a virtual visit and, because the visitors did not have areas to address with this group, we decided that it was unnecessary to meet with them.
Senior staff	Yes	
Practice educators	Yes	
Programme team	Yes	

## Section 4: Outcome from first review

### Recommendation of the visitors

In considering the evidence provided by the education provider as part of the initial submission and at the virtual approval visit, the visitors' recommend that there was insufficient evidence to demonstrate that our standards are met at this time, but that the programme(s) should be approved subject to the conditions noted below being met.

### Conditions

Conditions are requirements that must be met before programmes can be approved. We set conditions when there is insufficient evidence that standards are met. The visitors were satisfied that a number of the standards are met at this stage. However, the visitors were not satisfied that there is evidence that demonstrates that the following standards are met, for the reasons detailed below.

We expect education providers to review the issues identified in this report, decide on any changes that they wish to make to programmes, and then provide any further evidence to demonstrate how they meet the conditions. We set a deadline for responding to the conditions of 26 February 2021.

### **2.6 There must be an appropriate and effective process for assessing applicants' prior learning and experience.**

**Condition:** The education provider must demonstrate there is an appropriate and effective process for assessing applicants' prior learning and must provide clear

guidance for both applicants and staff about how applicants' prior learning and experience will be assessed.

**Reason:** The education provider stated in their mapping document that those entering the apprenticeship will undertake a 'skills scan' assessment. They explained this is a tool used with apprenticeships to assess the prior knowledge, skills and behaviours linked to the programme. The education provider stated further that Recognition of Prior Learning (RPL) will then be considered on a case-by-case basis based on the skills scan. The visitor noted that there was no clear and detailed information provided within the documentation about how the RPL process will work for this particular programme. At the visit, the education provider explained that applicants will be able to join the programme in year 2 through RPL, which means in each year there will be a mix of entries. The education provider explained that their reasoning behind this was to make the programme inclusive to the workforce. They further explained the education provider as a whole has a robust system in place to ensure an effective process. From their documentary review and through discussions at the visit, the visitors noted a lack of clarity in the RPL process into year 2. The visitors noted that the faculty documents described a general RPL process for programmes within the faculty but it was not clear how the process will apply to this programme. The visitors also noted from discussions that neither the education provider nor EMAS were able to clearly articulate what the RPL process would be for those entering into year 2. As such, the visitors were unable to determine that there was an appropriate process for assessing applicants' prior learning and that there was clear guidance within the documentation for staff and applicants, showing how prior learning will be assessed. The visitors therefore require the education provider to provide further information that clearly defines their process for assessing applicants' prior learning for entries into year 2 as well as evidence of how detailed RPL guidance will be made available to both applicants and staff.

### **3.1 The programme must be sustainable and fit for purpose.**

**Condition:** The education provider must demonstrate that there are plans in place to ensure the ongoing sustainability for the programme.

**Reason:** The visitors noted through their documentary review and from discussions at the visit that there is commitment from the partner organisation (East Midlands Ambulance Service (EMAS)) to fund the programme for 'the next three years'. The visitors noted there will be a one-off cohort starting in May 2021 and subsequently September and January entries each year starting from September 2021. The visitors understood that the funding was due to start from January 2021 as this was this initial proposed start date of the programme. As the education provider and EMAS were only able to provide commitment for the next three years, the visitors could not determine that there will be sufficient funding available to learners starting the programme in year 1 in September 2021 and January 2022, by the time they are in their final year of the programme. Therefore, the visitors could not determine that the programme would still be secure after three years and therefore request that the education provider provide further evidence of how they will ensure ongoing sustainability of the programme.

### **3.2 The programme must be effectively managed.**

**Condition:** The education provider must provide further evidence of the programme management structure, which describes the lines of responsibility of everyone involved in the day-to-day management of the programme.

**Reason:** The visitors were referred to the education provider's overall governance on their website and details of the programme's module specification as evidence for this standard. At the visit the programme team explained that directors within EMAS are briefed about the apprenticeships and that the programme team engages with several colleagues to make sure everyone is on the 'same page' as regards the management of the programme. The team further explained that they are aware of the differences between a degree apprenticeship (DA) and a full time programme and that they have appointed a band 7 member of staff to oversee the degree apprenticeship programme. They also explained that there is support for the DA team and that meetings are held regularly with their partners. From their review of the documents provided and the discussions at the visit, the visitors could not see how the different aspects of the programme would be effectively managed on a day-to-day basis, particularly given the partnership arrangement with EMAS to deliver part of the programme. For example, the visitors recognised that EMAS views the apprentices as 'employed learners' while the education provider view them as 'learners' but neither had a clear process for how aspects such as occupational health, student support, management of fitness to practice requirements, would work for these learners operationally. The visitors noted there was no clear responsibility for the programme and as such they could not determine that this standard was met. The education provider must therefore provide evidence of the programme management structure showing clear responsibilities of everyone involved in the day-to-day management of the programme.

### **3.9 There must be an adequate number of appropriately qualified and experienced staff in place to deliver an effective programme.**

**Condition:** The education provider must demonstrate that there will be an adequate number of appropriately qualified and experienced staff in place to deliver the programme effectively.

**Reason:** The visitors reviewed the staff curricula vitae submitted as evidence for this standard. At the visit, the visitors were made aware there are currently four paramedics within the teaching team, with an advert out for another and plans to recruit two additional staff before the start of the programme. In addition, the education provider explained there are clinical staff with advance clinical practice skills, associate practitioners, as well as staff from within the faculty who would all contribute to the delivery of the programme. The programme team also explained they have honorary contract staff and the possibility of using visiting lecturers to teach on the programme. The education provider stated that learners would benefit from learning from a variety of staff with different expertise which, they considered a good experience for the learners. The visitors considered that the education provider's approach towards the delivery of the programme would be beneficial to learners. However, they were unclear how the education provider will determine the number of staff adequate to the effective delivery of the programme to all learners. The visitors also noted that there were no timescales provided for future recruitments or the contingencies in place should the recruitment be unsuccessful. The visitors considered that the education provider would need to justify how they determine the number of staff is adequate. For example, how the education provider will determine the proportion of time each staff would spend working on the programme in relation to its practical requirements, the number of learners, their needs and the learning outcomes to be achieved is adequate. In addition, the visitors considered that the education provider would need to provide timescales for future recruitment and contingency plans should recruitment be unsuccessful. In this way, the

visitors would be able to make a judgment about whether there would be an adequate number of appropriately qualified and experienced staff in place by the programme's planned start date of May 2021. Therefore, the visitors require further evidence that clearly demonstrates there would be sufficient number of appropriately qualified staff to deliver an effective programme.

#### **4.10 The programme must include effective processes for obtaining appropriate consent from service users and learners.**

**Condition:** The programme team must provide evidence of the formal protocols to obtain consent from service users and learners when they participate as service users in practical and clinical teaching and for managing situations when learners decline from participating.

**Reason:** In their mapping document the education provider stated 'Consent forms are undertaken and an example are in the back of the Practice Assessment Document we use for our standard entry programme.' However, the visitors noted that no Practice Assessment Document (PAD) was provided. As such, they did not see evidence of the formal protocols to obtain consent from learners when they participate as service users, or for managing situations when learners decline from participating as service users in practical sessions. Similarly, there was no evidence provided for how consent is obtained from service users in practical teaching. When discussed at the visit, the education provider explained learners would need to give their consent when they take part in simulation activities, however, this was not articulated within the documentation. The education provider explained that learners would have been made aware of the activity prior to them taking part in it and that they could decide not to take part if they do not wish to. The programme team explained further that in cases where learners decline to participate, the education provider would discuss this with the individual learner and would ask the learner to work with their personal tutors to discuss how they could be supported. As regards obtaining consent from service users, the programme team explained service users would have had to give their consent when they agreed to take part in practical teaching. The visitors noted that this was not articulated in the programme documentation and as such they were unable to determine that the education provider had an effective process for obtaining consent from service users and learners or that the process is made clear to all parties involved. Therefore, the education provider must demonstrate there is an effective process in place for obtaining appropriate consent from service users and learners and for managing situations when learners decline from participating.

#### **5.8 Learners and practice educators must have the information they need in a timely manner in order to be prepared for practice-based learning.**

**Condition:** The education provider must provide evidence that demonstrates how they will ensure learners and practice educators have the information they need in order to be prepared for practice-based learning.

**Reason:** The education provider stated in their mapping that an induction for practice educators will be provided, including details of how to support learners to complete their ePortfolio and 'on the job training' elements. However, as the visitors were not provided with the practice education handbook or the practice assessment document, they were unclear what information learners and practice educators would be provided in order to prepare them for practice-based learning or how this information will be communicated

to them. At the visit, the programme team spoke in detail about different ideas on how they would support practice educators in order to prepare them for practice-based learning and for it to be effective. For example, they mentioned about providing information around requirements for progression, support for learners if they fail and how to support learners who are having difficulties on the programme. The visitors however noted that these plans were not finalised. As such, they could not be certain that expectations would be clearly set and communicated to both learners and practice educators ahead of practice-based learning in order for practice-based learning to be safe and effective. Therefore, the education provider must demonstrate:

- what information will be provided;
- how this information is provided; and
- that there is sufficient information in order to ensure learners and practice educators will be prepared for practice-based learning.

### **6.3 Assessments must provide an objective, fair and reliable measure of learners' progression and achievement.**

### **6.5 The assessment methods used must be appropriate to, and effective at, measuring the learning outcomes.**

**Condition:** The education provider must demonstrate that the practice-based learning assessments provide an objective, fair and reliable measure of learners' progression and achievement and that the assessment methods are appropriate to and effective at measuring the learning outcomes.

**Reason:** For these standards, the visitors were directed to the module specification forms and the validation document where they saw the learning outcomes as well as skills that learners are expected to have achieved by the end of the programme. The visitors also reviewed the assessment regulation section of the education provider's website and the SOPs mapping. From their review, the visitors were satisfied that assessments of the theoretical aspects of the programme provide an objective, fair and reliable measure of learners' progression and that the methods used would effectively deliver the learning outcomes. However, as the practice assessment document (PAD), which would be used to assess learners in practice, was not provided, the visitors were unable to determine whether assessments in practice would also be able to measure learners' progression and achievement. Similarly, without seeing the PAD, the visitors were unable to judge whether the assessment methods used in practice would appropriately and effectively measure the learning outcomes. In their review of the mapping document, the visitors noted for example, SOP 4 - be able to practise as an autonomous professional, exercising their own professional judgement, and its sub SOPs were mapped to module 5: Foundations of Decision Making in Ambulance Practice. The visitors noted that this module forms the first clinical practice education module and that part of its assessment will be undertaken via the PAD by practice educators. However, as the visitors did not see the PAD, they were unable to determine that the chosen assessment methods are in line with the learning outcomes of this module. In discussions with the programme team, the team informed the visitors work is being undertaken to develop the PAD as their aim is to have a standardised PAD that can meet the needs of the different education providers involved as well as EMAS and its practice educators.

As the visitors have not seen what the PAD will be, they were unable to determine that the assessments would:

- ensure assessment requirements are clear and realistic;
- provide all learners equal opportunity to demonstrate their progression and achievement; and
- be consistent and sufficiently thorough to allow learners to clearly demonstrate how far they have progressed during the course of the programme and achieved the learning outcomes.

Additionally, without seeing the PAD, the visitors were uncertain the assessment methods to be used to assess learners in practice would be effective at determining whether the learning outcomes of the programme have been met. Therefore, the education provider must provide further evidence to demonstrate that these two standards are met.

#### **6.4 Assessment policies must clearly specify requirements for progression and achievement within the programme.**

**Condition:** The education provider must demonstrate how they will make it clear to learners how resits in practice work to ensure they are fully aware of the requirements for progression and achievement in all parts of the programme.

**Reason:** The visitors reviewed the module specification forms provided as well as the assessment regulations available on the education provider's website. The visitors noted from their review, learners would be allowed reassessment opportunities for up to 90 credits at each academic level in any permutation or combination of module sizes. However, the visitors were unclear how resits would work in practice-based learning as this was not made clear in the documentation. At the visit, the education provider informed the visitors that there are rules around the number of fails and reiterated the reassessment opportunity mentioned in the documentation. However, details of how this would work in practice-based learning was not articulated in the documentation and as such, the visitors could not determine how learners would be made aware of these requirements. The visitors considered that in order for them to be able to determine whether this standard is met, clear information must be communicated to both learners and educators within the programme documentation showing specific requirements for progression and achievement, particularly as it relates to how resits in practice would work. The education provider therefore, must provide additional evidence to demonstrate that this standard is met.

## HCPC approval process report

Education provider	Manchester Metropolitan University
Name of programme(s)	Postgraduate Diploma in Forensic Psychology Practice, Flexible
Approval visit date	26 November 2020
Case reference	CAS-15832-Z3J1H1

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### Executive Summary

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## Section 1: Our regulatory approach

### Our standards

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### How we make our decisions

We make independent evidence based decisions about programme approval. For all assessments, we ensure that we have profession specific input in our decision making. In order to do this, we appoint [partner visitors](#) to undertake assessment of evidence presented through our processes. The visitors make recommendations to the Education and Training Committee (ETC). Education providers have the right of reply to the recommendation of the visitors, inclusive of conditions and recommendations. If an education provider wishes to, they can supply 'observations' as part of the process.

The ETC make decisions about the approval and ongoing approval of programmes. In order to do this, they consider recommendations detailed in process reports, and any observations from education providers (if submitted). The Committee meets in public on a regular basis and their decisions are available to view [on our website](#).

### HCPC panel

We always appoint at least one partner visitor from the profession (inclusive of modality and / or entitlement, where applicable) with which the assessment is concerned. We also ensure that visitors are supported in their assessment by a member of the HCPC executive team. Details of the HCPC panel for this assessment are as follows:

David Houlston	Biomedical scientist
Jacqueline Bates-Gaston	Practitioner psychologist - Forensic psychologist
Niall Gooch	HCPC executive

### Other groups involved in the virtual approval visit

There were other groups involved with the approval process as follows. Although we engage in collaborative scrutiny of programmes, we come to our decisions independently.

Lisa Coulthwaite	Independent chair (supplied by the education provider)	Manchester Metropolitan University
Joanne Elson	Secretary (supplied by the education provider)	Manchester Metropolitan University
Karin Spenser	External panel member	University of Derby
Rachel Forsyth	Internal panel member	Manchester Metropolitan University
Yasmin Gulcicek	Learner panel member	Manchester Metropolitan University

## Section 2: Programme details

Programme name	Postgraduate Diploma in Forensic Psychology Practice
Mode of study	FLX (Flexible)
Profession	Practitioner psychologist
Modality	Forensic psychologist
Proposed first intake	01 March 2021
Maximum learner cohort	Up to 10
Intakes per year	2
Assessment reference	APP02198

We undertook this assessment of a new programme proposed by the education provider via the approval process. This involved consideration of documentary evidence and a virtual approval visit, to consider whether the programme meet our standards for the first time.

## Section 3: Requirements to commence assessment

In order for us to progress with approval and monitoring assessments, we ask for certain evidence and information from education providers. The following is a list of evidence that we asked for through this process, and whether that evidence was provided. Education providers are also given the opportunity to include any further supporting evidence as part of their submission. Without a sufficient level of evidence, we need to consider whether we can proceed with the assessment. In this case, we decided that we were able to undertake our assessment with the evidence provided.

Type of evidence	Submitted	Comments
Completed education standards mapping document	Yes	
Information about the programme, including relevant policies and procedures, and contractual agreements	Yes	
Descriptions of how the programme delivers and assesses learning	Yes	
Proficiency standards mapping	Yes	
Information provided to applicants and learners	Yes	
Information for those involved with practice-based learning	Yes	
Information that shows how staff resources are sufficient for the delivery of the programme	Yes	
Internal quality monitoring documentation	Not Required	New programme so not available

Due to the COVID-19 pandemic, the education provider decided to move this event to a virtual (or remote) approval visit. In the table below, we have noted the meeting held, along with reasons for not meeting certain groups (where applicable):

<b>Group</b>	<b>Met</b>	<b>Comments</b>
Learners	Not Required	We determined prior to the visit that we could discuss learner matters with the programme team
Service users and carers (and / or their representatives)	Not Required	We determined prior to the visit that we could discuss learner matters with the programme team
Facilities and resources	Yes	There was a separate discussion about this with the programme team.
Senior staff	Yes	
Practice educators	No	Practice educators were not made available at the visit, this was the education provider's decision.  Learners bring their own placement on to the programme and the education provider therefore determined that it was not possible to invite partners at this stage.
Programme team	Yes	

## Section 4: Outcome from first review

### Recommendation of the visitors

In considering the evidence provided by the education provider as part of the initial submission and at the virtual approval visit, the visitors' recommend that there was insufficient evidence to demonstrate that our standards are met at this time, but that the programme(s) should be approved subject to the conditions noted below being met.

### Conditions

Conditions are requirements that must be met before programmes can be approved. We set conditions when there is insufficient evidence that standards are met. The visitors were satisfied that a number of the standards are met at this stage. However, the visitors were not satisfied that there is evidence that demonstrates that the following standards are met, for the reasons detailed below.

We expect education providers to review the issues identified in this report, decide on any changes that they wish to make to programmes, and then provide any further evidence to demonstrate how they meet the conditions. We set a deadline for responding to the conditions of 22 January 2021.

### **3.5 There must be regular and effective collaboration between the education provider and practice education providers.**

**Condition:** The education provider must demonstrate that their partnerships with employer partners continue to be effective at ensuring the practice-based learning components of the programme continue to be sustainable.

**Reason:** The visitors were aware from programme documentation, and from discussions both prior to and during the visit, that the intention was for learners to bring their own placements with them on to the programme. They considered that this was a reasonable approach within the overall landscape of the profession. However, they noted that in the documentation there was limited evidence about how the education provider would sustain formal relationships with practice partners. They were also unable to meet with representatives of practice educators at the visit, which meant that they did not have the opportunity to ask questions that would enable them to understand the employers' side of the working relationship. In particular the visitors were not clear about what plan was in place to ensure that there was regular and effective collaboration between the education provider and organisations such as Her Majesty's Prison & Probation Service, who would be employing learners on the programme. They therefore require further evidence relating to how these relationships will be maintained and developed, to ensure that the programme would be sustainable. This is especially important in light of the fact that learners are coming on to the programme with their own placement and so the education provider may not have an existing relationship with all those partners.

### **3.7 Service users and carers must be involved in the programme.**

**Condition:** The education provider must clarify their plans for the involvement of service users and carers in the programme.

**Reason:** In the documentary submission the education provider stated that they were in negotiations with a charity with a view to gaining access to a pool of relevant service users and carers for the programme to use. At the visit, the programme team said that the discussions were still ongoing. The visitors were not able to speak to any potential service users or carers at the visit. They were therefore unable to determine whether the standard was met, because the service users and carers had not been identified and the nature of their involvement in the programme was still undefined. It was not clear what support would be offered and how their involvement would be evaluated. They therefore require the education provider to submit additional evidence showing that they have a sustainable relationship with any organisation that is involved in managing or providing service users and carers, and that there will be appropriate service user and carer input to the programme.

### **3.8 Learners must be involved in the programme.**

**Condition:** The education provider must demonstrate that their plans for the involvement of learners on the programme are appropriate.

**Reason:** The education provider's plan for learner involvement, as laid out in the documentation, was that each cohort would identify one representative, who will be on a student representative team for the programme. This team will meet four times a year on a quarterly basis with the programme lead, the Head of Department and the

programme management team (PMT). The visitors considered that this was broadly appropriate, but the documentation did not contain any further detail about what kind of input the learners would have into the programme. For example, it was not clear how points raised by learners would be put into action, or what the powers and remit of the representative team would be. Discussions with the programme team did not clarify this further. The visitors were also unable to view the latest learner survey and any plan for action that emerged with respect to this programme. They were therefore unable to determine the process by which learners' involvement would translate into action. They require further evidence demonstrating that the student representative team will have appropriate input into the programme as described in the standard.

### **5.7 Practice educators must undertake regular training which is appropriate to their role, learners' needs and the delivery of the learning outcomes of the programme.**

**Condition:** The education provider must demonstrate how they ensure that practice educators have undergone regular appropriate training.

**Reason:** Both in the documentation and from discussions at the visit, the visitors were aware that practice educators were intended to receive regular training to ensure that they continued to be able to deliver the programme effectively. However, they were unable to determine whether the standard was met, because without evidence around the detail of the training content they were not able to be clear that the regular training would be appropriate to learners' needs and the delivery of the programme. They therefore require further evidence demonstrating that this training will ensure practice educators' ongoing suitability in line with the standard.

### **6.1 The assessment strategy and design must ensure that those who successfully complete the programme meet the standards of proficiency for the relevant part of the Register.**

**Condition:** The education provider must demonstrate how they will define the competencies to be assessed in practice-based learning, such that the assessment strategy and design enable learners to meet the standards of proficiency.

**Reason:** The visitors were aware from the documentation and from discussions at the visit that the education provider's intention for practice-based learning was that learners would agree the competencies by which they would be assessed, as part of an individual learning plan. However, in the documentation the visitors were not able to view the competencies that would be used at the start of this process, and at the visit the programme team confirmed that they had not yet been fully developed. This meant the visitors were unable to gain a full understanding of how assessment in practice-based learning would work. They were therefore unable to determine that the standard was met, and therefore require further evidence demonstrating that the overall assessment plan will be appropriate to the programme and enable learners to meet the standards of proficiency.

### **Recommendations**

We include recommendations when standards are met at or just above threshold level, and where there is a risk to that standard being met in the future. Recommendations do not need to be met before programmes can be approved, but they should be considered by education providers when developing their programmes.

**2.1 The admissions process must give both the applicant and the education provider the information they require to make an informed choice about whether to take up or make an offer of a place on a programme.**

**Recommendation:** The education provider should review how they make applicants aware of the details of occupational health and criminal convictions checks.

**Reason:** The visitors considered that this standard was met, because the information available to applicants gave a clear indication of what the application process was, what its requirements were, and what they could expect from the programme. However, the visitors did note that it was not made clear in some documents for applicants what would be involved in occupational health checks, and under what circumstances applicants who already had a Disclosure & Barring Service check might need to get a new one. The visitors therefore suggest that the education provider review the documents available to applicants to make sure that these matters were clarified.

## HCPC approval process report

Education provider	The Smae Institute
Validating body	Queen Margaret University
Name of programme(s)	BSc (Hons) Podiatry, Distance learning
Approval visit date	11 November 2020
Case reference	CAS-15919-P3S0K0

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## Section 1: Our regulatory approach

### Our standards

We approve programmes that meet our education standards, which ensure individuals that complete the programmes meet proficiency standards. The proficiency standards set out what a registrant should know, understand and be able to do when they complete their education and training. The education standards are outcome focused, enabling education providers to deliver programmes in different ways, as long as individuals who complete the programme meet the relevant proficiency standards.

Programmes are normally [approved on an open-ended basis](#), subject to satisfactory engagement with our monitoring processes. Programmes we have approved are listed [on our website](#).

### How we make our decisions

We make independent evidence based decisions about programme approval. For all assessments, we ensure that we have profession specific input in our decision making. In order to do this, we appoint [partner visitors](#) to undertake assessment of evidence presented through our processes. The visitors make recommendations to the Education and Training Committee (ETC). Education providers have the right of reply to the recommendation of the visitors, inclusive of conditions and recommendations. If an education provider wishes to, they can supply 'observations' as part of the process.

The ETC make decisions about the approval and ongoing approval of programmes. In order to do this, they consider recommendations detailed in process reports, and any observations from education providers (if submitted). The Committee meets in public on a regular basis and their decisions are available to view [on our website](#).

### HCPC panel

We always appoint at least one partner visitor from the profession (inclusive of modality and / or entitlement, where applicable) with which the assessment is concerned. We also ensure that visitors are supported in their assessment by a member of the HCPC executive team. Details of the HCPC panel for this assessment are as follows:

Emma Supple	Chiropodist / podiatrist
Angela Duxbury	Radiographer - Therapeutic radiographer
Niall Gooch	HCPC executive

Initially the visitors for this visit were Emma Supple and David Houliston. David withdrew from the visit at short notice and we were not able to replace him. The visit therefore went ahead with an HCPC panel of Niall Gooch and Emma Supple. Angela Duxbury, an experienced educationalist, was appointed subsequent to the visit on the understanding that she would review the documentation and consult with the HCPC Panel who had been present at the visit, so that we had input from both a professional specialist and an educational specialist.

### Other groups involved in the virtual approval visit

There were other groups involved with the approval process as follows. Although we engage in collaborative scrutiny of programmes, we come to our decisions independently.

Christine Raffaelli	Independent chair (supplied by the education provider)	Queen Margaret University – validating body
Dawn Martin	Secretary (supplied by the education provider)	Queen Margaret University – validating body

## Section 2: Programme details

Programme name	BSc (Hons) Podiatry
Mode of study	DL (Distance learning)
Profession	Chiropodist / podiatrist
Entitlement	Prescription only medicines – administration Prescription only medicines – sale / supply
First intake	01 August 2021
Maximum learner cohort	Up to 30
Intakes per year	1
Assessment reference	APP02217

We undertook this assessment of a new programme proposed by the education provider via the approval process. This involved consideration of documentary evidence and a virtual approval visit, to consider whether the programme meet our standards for the first time.

## Section 3: Requirements to commence assessment

In order for us to progress with approval and monitoring assessments, we ask for certain evidence and information from education providers. The following is a list of evidence that we asked for through this process, and whether that evidence was provided. Education providers are also given the opportunity to include any further supporting evidence as part of their submission. Without a sufficient level of evidence, we need to consider whether we can proceed with the assessment. In this case, we decided that we were able to undertake our assessment with the evidence provided.

Type of evidence	Submitted	Comments
Completed education standards mapping document	Yes	
Information about the programme, including relevant policies and procedures, and contractual agreements	Yes	
Descriptions of how the programme delivers and assesses learning	Yes	
Proficiency standards mapping	Yes	
Information provided to applicants and learners	Yes	
Information for those involved with practice-based learning	Yes	
Information that shows how staff resources are sufficient for the delivery of the programme	Yes	

Internal quality monitoring documentation	Not Required	Only requested if the programme (or a previous version) is currently running
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Due to the COVID-19 pandemic, the education provider decided to move this event to a virtual (or remote) approval visit. In the table below, we have noted the meeting held, along with reasons for not meeting certain groups (where applicable):

Group	Met	Comments
Learners	Not Required	Before the visit we determined that an assessment of learner involvement was possible without a specific learner meeting.
Service users and carers (and / or their representatives)	Not Required	Before the visit we determined that an assessment of learner involvement was possible without a specific service user and carer meeting.
Facilities and resources	Yes	
Senior staff	Yes	
Practice educators	Yes	
Programme team	Yes	

## Section 4: Outcome from first review

### Recommendation of the visitors

In considering the evidence provided by the education provider as part of the initial submission and at the virtual approval visit, the visitors' recommend that there was insufficient evidence to demonstrate that our standards are met at this time, but that the programme(s) should be approved subject to the conditions noted below being met.

### Conditions

Conditions are requirements that must be met before programmes can be approved. We set conditions when there is insufficient evidence that standards are met. The visitors were satisfied that a number of the standards are met at this stage. However, the visitors were not satisfied that there is evidence that demonstrates that the following standards are met, for the reasons detailed below.

We expect education providers to review the issues identified in this report, decide on any changes that they wish to make to programmes, and then provide any further evidence to demonstrate how they meet the conditions. We set a deadline for responding to the conditions of 05 February 2021.

## **2.6 There must be an appropriate and effective process for assessing applicants' prior learning and experience.**

**Condition:** The education provider must clarify how they will take account of the prior learning and experience of applicants who are coming on to the programme who have not been through the education provider's own Level 4 and Level 5 programmes.

**Reason:** The visitors were aware from the programme documentation that there were two "internal" routes on to the programme. Firstly, entry into year one was possible via the Level 4 Foot Health Diploma (FHD). Entry to year 1 allows learners to accrue the remainder of their year 1, Level 4 credits. Secondly, learners who have completed the education provider's DipHE Assistant Practitioner – Podiatry (Level 5) can enter the programme in year three. They would then be prepared for the further learning and practice which would enable them to be awarded the full BSc (Hons). The visitors were aware that the education provider was prepared for how to assess such applicants' prior learning and experience in an appropriate and effective way.

However, they also noted that the education provider anticipated that some applicants might not be coming from the education provider's own programmes, but might nevertheless be suitable for the programme. The visitors were unclear what process the education provider would use to assess the prior learning and experience of these applicants. From discussions at the visit, they understood that such applications would be considered on a case-by-case basis, but they considered that it would be necessary to have a formal process by which this was done, to ensure fairness in the process. They therefore require further evidence demonstrating that the prior learning and experience of these applicants will be assessed in an appropriate and effective way, and that the nature of this assessment will be appropriately communicated to applicants.

## **3.8 Learners must be involved in the programme.**

**Condition:** The education provider must demonstrate how learners will be involved in the programme.

**Reason:** To evidence this standard, the education provider referred to the Validation document, the student handbook, and the DipHE review document (from the Foot Health Diploma). These documents showed that learners from the Foot Health Diploma had been involved in developing the new programme and they also showed that the education provider had plans to involve learners in the new BSc programme on an ongoing basis once it was running. However, the visitors were not clear from this evidence exactly how learners would be enabled to feed into the ongoing development and continuous improvement of the programme, and so they were not able to determine if the standard was met. This matter was discussed with the programme team at the visit and the education provider gave verbal assurances about their plans, but the detail was still not fully developed. The visitors therefore require further evidence to show how learners will feed into areas such as the design, delivery or review of the programme.

## **3.12 The resources to support learning in all settings must be effective and appropriate to the delivery of the programme, and must be accessible to all learners and educators.**

**Condition:** The education provider must provide further evidence relating to how they will ensure the availability of appropriate online resources and facilities for all learners.

**Reason:** As this is a distance learning programme, the visitors were aware that the accessibility and functioning of the online facilities, and the suitability of the online resources, were extremely important to the effective functioning of the programme. The documentation outlined the education provider's plans for using virtual learning environments (VLEs) to deliver the programme. At the visit the visitors discussed with the programme team how these plans would be put into practice. Following these discussions the visitors remained unclear about the details of what VLEs would be used, and how they would be used. They were therefore unable to determine whether the standard was met, and require further evidence relating to how VLEs will be used to effectively deliver the teaching, learning and assessment activities of the programme.

### **5.7 Practice educators must undertake regular training which is appropriate to their role, learners' needs and the delivery of the learning outcomes of the programme.**

**Condition:** The education provider must demonstrate how they will ensure that practice educators have regular access to appropriate training.

**Reason:** The education provider cited as evidence for this standard the Validation document and the review document for the Foot Health Diploma (FHD). These documents did contain some broad outlines of what the education provider currently provided in the way of training for FHD practice educators, and what they planned to do for this programme. However, from the level of detail provided, the visitors were not clear about the specifics of the planned training – for example, how the education provider would determine training needs, and how they would ensure that practice educators attended the training. The visitors were therefore unable to determine whether the standard was met, and require further evidence relating to the detail of the planned practice educator training.

## **Recommendations**

We include recommendations when standards are met at or just above threshold level, and where there is a risk to that standard being met in the future. Recommendations do not need to be met before programmes can be approved, but they should be considered by education providers when developing their programmes.

### **5.2 The structure, duration and range of practice-based learning must support the achievement of the learning outcomes and the standards of proficiency.**

**Recommendation:** The education provider should consider reviewing how they intend to ensure that the practice components of the programme will be relevant to the whole range of current practice in the profession.

**Reason:** The visitors considered that the standard was met, because there were appropriate placements for the learners to achieve the learning outcomes and the standards of proficiency. However, they did note that there were certain aspects of podiatry practice that were important to understand in order to practise safely and effectively, but might not be encountered frequently in private practice. This was raised at the visit and the education provider suggested that they would liaise very closely with

their practice partners to ensure that learners were getting a suitable exposure. The visitors recommend that the education provider make sure they continue this liaison to ensure that all learners continue to access the range of clinical experiences required.

## HCPC approval process report

Education provider	University College London
Name of programme(s)	MSc Orthoptics (pre-registration), Full time accelerated
Approval visit date	21 October 2020
Case reference	CAS-16156-H6Y1X3

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### Executive Summary

We are the Health and Care Professions Council (HCPC), a regulator set up to protect the public. We set standards for education and training, professional knowledge and skills, conduct, performance and ethics; keep a register of professionals who meet those standards; approve programmes which professionals must complete before they can register with us; and take action when professionals on our Register do not meet our standards.

The following is a report on the approval process undertaken by the HCPC to ensure that programme(s) detailed in this report meet our standards of education and training (referred to through this report as ‘our standards’). The report details the process itself, the evidence considered, and recommendations made regarding programme approval.

## Section 1: Our regulatory approach

### Our standards

We approve programmes that meet our education standards, which ensure individuals that complete the programmes meet proficiency standards. The proficiency standards set out what a registrant should know, understand and be able to do when they complete their education and training. The education standards are outcome focused, enabling education providers to deliver programmes in different ways, as long as individuals who complete the programme meet the relevant proficiency standards.

Programmes are normally [approved on an open-ended basis](#), subject to satisfactory engagement with our monitoring processes. Programmes we have approved are listed [on our website](#).

### How we make our decisions

We make independent evidence based decisions about programme approval. For all assessments, we ensure that we have profession specific input in our decision making. In order to do this, we appoint [partner visitors](#) to undertake assessment of evidence presented through our processes. The visitors make recommendations to the Education and Training Committee (ETC). Education providers have the right of reply to the recommendation of the visitors, inclusive of conditions and recommendations. If an education provider wishes to, they can supply 'observations' as part of the process.

The ETC make decisions about the approval and ongoing approval of programmes. In order to do this, they consider recommendations detailed in process reports, and any observations from education providers (if submitted). The Committee meets in public on a regular basis and their decisions are available to view [on our website](#).

### HCPC panel

We always appoint at least one partner visitor from the profession (inclusive of modality and / or entitlement, where applicable) with which the assessment is concerned. We also ensure that visitors are supported in their assessment by a member of the HCPC executive team. Details of the HCPC panel for this assessment are as follows:

Claire Wilson	Orthoptist
David Newsham	Orthoptist
Temilolu Odunaike	HCPC executive

## Section 2: Programme details

Programme name	MSc Orthoptics (pre-registration)
Mode of study	FTA (Full time accelerated)
Profession	Orthoptist
Proposed First intake	01 September 2021
Maximum learner cohort	Up to 25
Intakes per year	1
Assessment reference	APP02268

We undertook this assessment of a new programme proposed by the education provider via the approval process. This involved consideration of documentary evidence and a virtual approval visit, to consider whether the programme meet our standards for the first time.

### Section 3: Requirements to commence assessment

In order for us to progress with approval and monitoring assessments, we ask for certain evidence and information from education providers. The following is a list of evidence that we asked for through this process, and whether that evidence was provided. Education providers are also given the opportunity to include any further supporting evidence as part of their submission. Without a sufficient level of evidence, we need to consider whether we can proceed with the assessment. In this case, we decided that we were able to undertake our assessment with the evidence provided.

Type of evidence	Submitted	Comments
Completed education standards mapping document	Yes	
Information about the programme, including relevant policies and procedures, and contractual agreements	Yes	
Descriptions of how the programme delivers and assesses learning	Yes	
Proficiency standards mapping	Yes	
Information provided to applicants and learners	Yes	
Information for those involved with practice-based learning	Yes	
Information that shows how staff resources are sufficient for the delivery of the programme	Yes	
Internal quality monitoring documentation	Not Required	Programme is new and has not run yet.

Due to the COVID-19 pandemic, the education provider decided to move this event to a virtual (or remote) approval visit. In the table below, we have noted the meeting held, along with reasons for not meeting certain groups (where applicable):

Group	Met	Comments
Learners	Not Required	As this was a virtual visit and, because the visitors did not have areas to address with this group, we decided that it was unnecessary to meet with them.
Service users and carers (and / or their representatives)	No	As this was a virtual visit and, due to the impact of Covid-19 pandemic, it was not possible to meet with this group.
Facilities and resources	Yes	
Senior staff	Yes	

Practice educators	Yes	
Programme team	Yes	

## Section 4: Outcome from first review

### Recommendation of the visitors

In considering the evidence provided by the education provider as part of the initial submission and at the virtual approval visit, the visitors' recommend that there was insufficient evidence to demonstrate that our standards are met at this time, but that the programme(s) should be approved subject to the conditions noted below being met.

### Conditions

Conditions are requirements that must be met before programmes can be approved. We set conditions when there is insufficient evidence that standards are met. The visitors were satisfied that a number of the standards are met at this stage. However, the visitors were not satisfied that there is evidence that demonstrates that the following standards are met, for the reasons detailed below.

We expect education providers to review the issues identified in this report, decide on any changes that they wish to make to programmes, and then provide any further evidence to demonstrate how they meet the conditions. We set a deadline for responding to the conditions of 06 January 2021.

### 3.7 Service users and carers must be involved in the programme.

**Condition:** The education provider must demonstrate that service users and carers are involved in the programme.

**Reason:** In their mapping document, the education provider stated that service user and carers' involvement will be undertaken after the current pandemic and service had recovered. At the visit, the visitors asked for updates on this and the education provider stated that they would start work on service user and carer involvement following the visit. As the education provider did not provide any evidence to demonstrate how service users and carers contribute to the programme, the visitors could not determine that this standard was met. They therefore request that the education provider evidence how service users and carers will be involved and how they would be supported so that they are able to be appropriately involved in the programme.

**4.1 The learning outcomes must ensure that learners meet the standards of proficiency for the relevant part of the Register.**

**4.2 The learning outcomes must ensure that learners understand and are able to meet the expectations of professional behaviour, including the standards of conduct, performance and ethics.**

**6.1 The assessment strategy and design must ensure that those who successfully complete the programme meet the standards of proficiency for the relevant part of the Register.**

**6.2 Assessment throughout the programme must ensure that learners demonstrate they are able to meet the expectations of professional behaviour, including the standards of conduct, performance and ethics.**

**Condition:** The education provider must demonstrate how the Ophthalmology I and II learning outcomes and their assessments will ensure:

- i. The standards of proficiency (SOPs) for Orthoptists are met; and
- ii. Learners are able to meet the expectations of professional behaviour, including the standards of conduct, performance and ethics.

**Reason:** The visitors reviewed programme documentation relating to learning outcomes and assessment before the visit and discussed these areas with the programme staff. The visitors noted from their review that the SOPs mapping document referenced the lecturer spreadsheet. For the SOPs listed below, the visitors were referred to the Ophthalmology I and II modules and particular lectures within the lecturer spreadsheet. In the lecturer spreadsheet, the visitors noted the topics which would be taught within each lecture. For example, lecture 5.3 (Professional standards III) in Ophthalmology II was identified by the education provider as delivering SOP 1.2 (recognise the need to manage their own workload and resources effectively and be able to practise accordingly). When comparing the topics within the identified lectures with the associated module descriptors, the visitors were unable to determine associated learning outcomes relating to the following SOPs. In addition, they could not see clear information elsewhere within the documentation where these SOPs were covered.

The visitors considered that these SOPs may be encompassed by the learning outcome 'Practice within professional codes of conduct' but this only appears in the final placement module (Clinical placement III). The visitors noted that the learning outcomes in earlier modules were not related to the following SOPs and were unclear about how these were to be assessed before the final placement:

- **1.2** recognise the need to manage their own workload and resources effectively and be able to practise accordingly
- **2.1** understand the need to act in the best interests of service users at all times
- **2.5** know about current legislation applicable to the work of their profession
- **2.7** be able to exercise a professional duty of care
- **3.1** understand the need to maintain high standards of personal and professional conduct
- **3.2** understand the importance of maintaining their own health
- **3.3** understand both the need to keep skills and knowledge up to date and the importance of career-long learning

- **15.1** understand the need to maintain the safety of both service users and those involved in their care
- **15.2** be aware of applicable health and safety legislation, and any relevant safety policies and procedures in force at the workplace, such as incident reporting, and be able to act in accordance with these
- **15.3** be able to work safely, including being able to select appropriate hazard control and risk management, reduction or elimination techniques in a safe manner and in accordance with health and safety legislation

For the following SOPs, the visitors were referred to the Ophthalmology I and II modules. The visitors noted that there were no learning outcomes relating to these SOPs in these modules and they could not see clear information elsewhere within the documentation where these SOPs are covered. For example, the visitors noted that the intended learning outcomes for the Ophthalmology II module are:

- Understand normal and abnormal human development; and
- Demonstrate an intermediate understanding of the diagnosis and management of common paediatric ophthalmic conditions.

However, within the lecturer spreadsheet, lecture 1.6 (Gillick Competency; the voice of the child) contains a topic relating to competency and communication with children while lecture 1.7 (Non accidental injury (NAI)) relates to safeguarding processes which the education provider identified would ensure SOPs 7.3, 8.5, 8.7, 8.8 are delivered. When comparing the topics within the identified lectures with the associated module descriptors, the visitors were unable to determine associated learning outcomes relating to the following SOPs and it is not clear where this is addressed by a learning outcome in any other module.

- **7.3** be able to recognise and respond appropriately to situations where it is necessary to share information to safeguard service users or the wider public
- **8.5** be aware of the characteristics and consequences of verbal and non-verbal communication and how this can be affected by factors such as culture, age, ethnicity, gender, religious beliefs and socio-economic status
- **8.7** understand the need to assist the communication needs of service users such as through the use of an appropriate interpreter, wherever possible
- **8.8** recognise the need to use interpersonal skills to encourage the active participation of service users
- **11.2** recognise the value of case conferences and other methods of review
- **13.3** understand the concept of leadership and its application to practice
- **13.5** understand the structure and function of health and social care services in the UK
- **13.21** know how psychology and sociology can inform an understanding of health, illness and health care in the context of orthoptics and know how to apply this in practice
- **13.22** be aware of human behaviour and recognise the need for sensitivity to the psychosocial aspects of ocular conditions, including strabismus

The visitors were unable to identify a clear link between the learning outcomes and assessments of the Ophthalmology I and II modules (which were mapped to the

professionalism aspect of the SOPs) and the highlighted SOPs. For example, the visitors noted that learning outcomes in Ophthalmology I related to areas such as understanding the anatomy of the eye, awareness of electrodiagnostics and other types of ophthalmic imaging without reference to professionalism. Similarly, they noted that although lecture 3.4 (Professional standards – II) in Ophthalmology I referred to professional standards and was mapped to SOPs relating to professionalism and topics taught included professionalism, they were unclear how the module learning outcomes and their assessment related to professionalism.

When this was discussed with the programme team at the visit, the team stated they would re-write the SOPs to map them to the appropriate learning outcomes. As the programme documentation did not demonstrate how the SOPs listed above will be met by the learning outcomes and the assessments, the visitors could not determine that SETs 4.1, 4.2, 6.1 or 6.2 were met. They therefore require the education provider to submit evidence showing how the learning outcomes and the assessments will enable all learners to meet the standards of proficiency for orthoptists as well as the expectations of professional behaviour, including the standard of conduct, performance and ethics.

### **6.3 Assessments must provide an objective, fair and reliable measure of learners' progression and achievement.**

### **6.5 The assessment methods used must be appropriate to, and effective at, measuring the learning outcomes.**

**Condition:** The education provider must demonstrate that the final practice-based assessment is a fair and reliable measure of learners' progression and achievement and that the assessment methods are appropriate to and effective at measuring the learning outcomes.

**Reason:** The education provider evidenced the Module Assessment and the Overarching Principles of Assessment sections of their website to demonstrate these standards. From their review the visitors identified the different assessment methods as well as the different principles governing assessments which apply to all programmes delivered at this education provider.

At the visit, when asked about how learners will be assessed in clinical practice, the programme team explained that the final assessments will be undertaken at their 12 different practice-based learning sites around the country. The visitors learnt that these sites provide learners with different opportunities to gain their learning outcomes, meaning the final assessment would be specific to the practice-based learning site. From discussions with the programme team, the visitors were unable to determine the guidance provided to the practice-based learning sites to demonstrate how the education provider ensures parity across the 12 sites. As such, the visitors were unclear how the programme team guarantees overall competence that covers all clinical aspects of orthoptic practice as, learners may not have exposure to the relevant and suitable patients at all 12 sites during the final assessment. The visitors were therefore unclear how the assessment of learners at different sites, under different conditions and with different service users and carers, provides all learners with an equal opportunity to demonstrate their progression and achievement. In addition, as the visitors were unclear about how the final assessment was undertaken in practice-based learning, the

visitors were unable to determine whether the final assessment in practice-based learning is appropriate to, and effective at, measuring the learning outcomes. As such, the visitors require the education provider to demonstrate how they will ensure the final practice-based assessments provide fair and reliable measure of learners' progression and achievement and that, the method used can appropriately and effectively measure the learning outcomes.

#### **6.5 The assessment methods used must be appropriate to, and effective at, measuring the learning outcomes.**

**Condition:** The education provider must make clear in the module form which learning outcomes are assessed by which assessments.

**Reason:** The visitors reviewed the module forms submitted as well as the module assessment section of the education provider's website. The visitors identified lists of the learning outcomes and details of both the summative and formative assessments for each of the modules. However, they noted that the form did not make clear which components of the assessments assess which learning outcomes. When discussed with the programme team they were unable to provide further clarity about which assessment methods assessed the relevant learning outcomes. Due to the lack of clarity in the documentation, it was difficult for the visitors to determine how the assessments would be used to decide whether the learning outcomes, and subsequently the standards of proficiency have been met. Therefore, the education provider must update the module forms so it is clear which learning outcomes are assessed by which assessment.

## HCPC approval process report

Education provider	University of East Anglia
Name of programme(s)	BSc (Hons) Operating Department Practice, Full time
Approval visit date	03 November 2020
Case reference	CAS-16007-R9P5F4

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### Executive Summary

We are the Health and Care Professions Council (HCPC), a regulator set up to protect the public. We set standards for education and training, professional knowledge and skills, conduct, performance and ethics; keep a register of professionals who meet those standards; approve programmes which professionals must complete before they can register with us; and take action when professionals on our Register do not meet our standards.

The following is a report on the approval process undertaken by the HCPC to ensure that programme(s) detailed in this report meet our standards of education and training (referred to through this report as 'our standards'). The report details the process itself, the evidence considered, and recommendations made regarding programme approval.

## Section 1: Our regulatory approach

### Our standards

We approve programmes that meet our education standards, which ensure individuals that complete the programmes meet proficiency standards. The proficiency standards set out what a registrant should know, understand and be able to do when they complete their education and training. The education standards are outcome focused, enabling education providers to deliver programmes in different ways, as long as individuals who complete the programme meet the relevant proficiency standards.

Programmes are normally [approved on an open-ended basis](#), subject to satisfactory engagement with our monitoring processes. Programmes we have approved are listed [on our website](#).

### How we make our decisions

We make independent evidence based decisions about programme approval. For all assessments, we ensure that we have profession specific input in our decision making. In order to do this, we appoint [partner visitors](#) to undertake assessment of evidence presented through our processes. The visitors make recommendations to the Education and Training Committee (ETC). Education providers have the right of reply to the recommendation of the visitors, inclusive of conditions and recommendations. If an education provider wishes to, they can supply 'observations' as part of the process.

The ETC make decisions about the approval and ongoing approval of programmes. In order to do this, they consider recommendations detailed in process reports, and any observations from education providers (if submitted). The Committee meets in public on a regular basis and their decisions are available to view [on our website](#).

### HCPC panel

We always appoint at least one partner visitor from the profession (inclusive of modality and / or entitlement, where applicable) with which the assessment is concerned. We also ensure that visitors are supported in their assessment by a member of the HCPC executive team. Details of the HCPC panel for this assessment are as follows:

Adele Nightingale	Operating department practitioner
Tony Scripps	Operating department practitioner
John Archibald	HCPC executive

### Other groups involved in the virtual approval visit

There were other groups involved with the approval process as follows. Although we engage in collaborative scrutiny of programmes, we come to our decisions independently.

Julia Hubbard	Independent chair (supplied by the education provider)	University of East Anglia
Dawn Goff	Secretary (supplied by the education provider)	University of East Anglia
John Dade	External panel member	University of Leicester
Audrey Gibbs	Internal panel member	University of East Anglia
Mike Donnellon	Professional body representative	College of Operating Department Practitioners

Sandra Ward	Professional body representative	College of Operating Department Practitioners
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## Section 2: Programme details

Programme name	BSc (Hons) Operating Department Practice
Mode of study	FT (Full time)
Profession	Operating department practitioner
Proposed first intake	01 September 2021
Maximum learner cohort	Up to 30
Intakes per year	1
Assessment reference	APP02245

We undertook this assessment of a new programme proposed by the education provider via the approval process. This involved consideration of documentary evidence and a virtual approval visit, to consider whether the programme meet our standards for the first time.

## Section 3: Requirements to commence assessment

In order for us to progress with approval and monitoring assessments, we ask for certain evidence and information from education providers. The following is a list of evidence that we asked for through this process, and whether that evidence was provided. Education providers are also given the opportunity to include any further supporting evidence as part of their submission. Without a sufficient level of evidence, we need to consider whether we can proceed with the assessment. In this case, we decided that we were able to undertake our assessment with the evidence provided.

Type of evidence	Submitted	Comments
Completed education standards mapping document	Yes	
Information about the programme, including relevant policies and procedures, and contractual agreements	Yes	
Descriptions of how the programme delivers and assesses learning	Yes	
Proficiency standards mapping	Yes	
Information provided to applicants and learners	Yes	
Information for those involved with practice-based learning	Yes	
Information that shows how staff resources are sufficient for the delivery of the programme	Yes	
Internal quality monitoring documentation	No	The programme has not yet run so no internal quality monitoring documentation is available.

Due to the COVID-19 pandemic, the education provider decided to move this event to a virtual (or remote) approval visit. In the table below, we have noted the meeting held, along with reasons for not meeting certain groups (where applicable):

Group	Met	Comments
Learners	Yes	We met with learners from the currently approved DipHE Operating Department Practice programme.
Service users and carers (and / or their representatives)	No	The visitors were happy to explore any issues they had about service users and carers with other stakeholders, and did not need to put any questions to service users specifically.
Facilities and resources	Yes	
Senior staff	Yes	
Practice educators	Yes	
Programme team	Yes	

## Section 4: Outcome from first review

### Recommendation of the visitors

In considering the evidence provided by the education provider as part of the initial submission and at the virtual approval visit, the visitors' recommend that there was insufficient evidence to demonstrate that our standards are met at this time, but that the programme(s) should be approved subject to the conditions noted below being met.

### Conditions

Conditions are requirements that must be met before programmes can be approved. We set conditions when there is insufficient evidence that standards are met. The visitors were satisfied that a number of the standards are met at this stage. However, the visitors were not satisfied that there is evidence that demonstrates that the following standards are met, for the reasons detailed below.

We expect education providers to review the issues identified in this report, decide on any changes that they wish to make to programmes, and then provide any further evidence to demonstrate how they meet the conditions. We set a deadline for responding to the conditions of 01 February 2021.

#### 2.1 The admissions process must give both the applicant and the education provider the information they require to make an informed choice about whether to take up or make an offer of a place on a programme.

**Condition:** The education provider must ensure information about costs in applicant-facing material is up-to-date and clear, so it allows for informed decision-making.

**Reason:** Prior to the visit, the visitors were informed that details of the programme and entry requirements were available on the education provider website. The visitors were also made aware that the education provider holds open days, which provide an opportunity to get to know more about the programme. At the visit, the visitors were

informed that the education provider charges a fee of £75 for the reassessment of an assessment. The visitors were also aware that in the third year, learners undertake an extended period of practice-based learning, rotating between trusts. The visitors considered this would have implications for costs. The visitors however had not seen any information in applicant-facing documents of both these additional costs. Therefore, the visitors could not be sure applicants will have all the information they require as part of the admissions process. The visitors require further evidence that applicants have all the information they need about costs and that it is up-to-date and clear, so it allows them to make an informed choice.

#### **4.1 The learning outcomes must ensure that learners meet the standards of proficiency for the relevant part of the Register.**

#### **6.1 The assessment strategy and design must ensure that those who successfully complete the programme meet the standards of proficiency for the relevant part of the Register.**

**Condition:** The education provider must submit further information to demonstrate that learners who complete the programme are able to meet the standards of proficiency (SOPs) for operating department practitioners, and that the assessment strategy makes sure learners meet all the SOPs before completing the programme.

**Reason:** As part of the documentary review prior to the visit, the visitors were informed from the SOPs mapping document of four SOPs which were taught and assessed exclusively in practice-based learning modules. At the visit, the visitors were informed that the competency document, which confirms the competencies to be completed in practice-based learning, had yet to be completed. In the meeting with the programme team, the visitors were informed the competency document will be ready for January 2021. As the competencies and assessment methods were yet to be confirmed, the visitors were unable to see the competencies identified by the education provider being assessed in practice-based learning, and their link to the learning outcomes of the programme. The visitors were subsequently not able to determine whether the following SOPs are covered by the learning outcomes in the programme, and that the assessment strategy and design ensures the learning outcomes demonstrate the SOPs:

- **9.4** be able to contribute effectively to work undertaken as part of a multi-disciplinary team;
- **14.10** be able to modify and adapt practice to emergency situations;
- **14.14** be able to effectively gather information relevant to the care of service users in a range of emotional states; and
- **14.20** be able to adapt and apply problem solving skills to clinical emergencies.

The visitors considered the education provider must demonstrate how learners who complete the programme can meet the SOPs for operating department practitioners, and that the assessment strategy makes sure learners meet all the SOPs before completing the programme.

## **5.8 Learners and practice educators must have the information they need in a timely manner in order to be prepared for practice-based learning.**

**Condition:** The education provider must provide further information to demonstrate that learners and practice educators have clear expectations regarding practice-based learning.

**Reason:** To evidence this standard, the education provider informed the visitors that learners and practice educators are provided with information such as planners and learning outcomes, prior to placement by the education provider's Learning and Teaching service. At the visit, the visitors were informed that the competency document, which confirms the competencies to be completed in practice-based learning, had yet to be completed. In the meeting with the programme team, the visitors were informed the competency document will be ready for January 2021. The visitors therefore were unable to see the competencies being assessed. As the competencies and assessment methods were yet to be confirmed, and the competency document had yet to be completed, the visitors were unclear about the information that learners and practice educators will have prior to undertaking practice-based learning. The visitors were therefore unsure about how the education provider ensured all understood their roles and what is required for practice-based learning to be safe and effective. The visitors therefore require further information to demonstrate that learners and practice educators have clear expectations regarding practice-based learning.

## **6.5 The assessment methods used must be appropriate to, and effective at, measuring the learning outcomes.**

**Condition:** The education provider must provide further evidence about the methods the education provider uses to assess learners.

**Reason:** To meet this standard, the visitors were informed that all university assessments are internally peer reviewed by the Education Committee and externally peer reviewed by the external examiner. The visitors were also made aware that the competency document, which confirms the competencies to be completed in practice-based learning, had yet to be completed. In the meeting with the programme team, the visitors were informed the competency document will be ready for January 2021. The visitors therefore were unable to see how the competencies were being assessed. As the competencies and assessment methods were yet to be confirmed, the visitors were unable to determine whether they were appropriate and effective at measuring the learning outcomes. The visitors were unsure that the methods used to assess learners allows the education provider to decide whether the learning outcomes of the programme are met. The visitors therefore require further evidence that the chosen methods are in line with the learning outcomes of the practice-based learning modules so they confirm learners who complete the programme meet the SOPs for operating department practitioners.

## HCPC approval process report

Education provider	University of Winchester
Name of programme(s)	BSc (Hons) Nutrition and Dietetics, Full time
Approval visit date	09 December 2020
Case reference	CAS-15621-H3P9H9

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### Executive Summary

We are the Health and Care Professions Council (HCPC), a regulator set up to protect the public. We set standards for education and training, professional knowledge and skills, conduct, performance and ethics; keep a register of professionals who meet those standards; approve programmes which professionals must complete before they can register with us; and take action when professionals on our Register do not meet our standards.

The following is a report on the approval process undertaken by the HCPC to ensure that programme(s) detailed in this report meet our standards of education and training (referred to through this report as 'our standards'). The report details the process itself, the evidence considered, and recommendations made regarding programme approval.

## Section 1: Our regulatory approach

### Our standards

We approve programmes that meet our education standards, which ensure individuals that complete the programmes meet proficiency standards. The proficiency standards set out what a registrant should know, understand and be able to do when they complete their education and training. The education standards are outcome focused, enabling education providers to deliver programmes in different ways, as long as individuals who complete the programme meet the relevant proficiency standards.

Programmes are normally [approved on an open-ended basis](#), subject to satisfactory engagement with our monitoring processes. Programmes we have approved are listed [on our website](#).

### How we make our decisions

We make independent evidence based decisions about programme approval. For all assessments, we ensure that we have profession specific input in our decision making. In order to do this, we appoint [partner visitors](#) to undertake assessment of evidence presented through our processes. The visitors make recommendations to the Education and Training Committee (ETC). Education providers have the right of reply to the recommendation of the visitors, inclusive of conditions and recommendations. If an education provider wishes to, they can supply 'observations' as part of the process.

The ETC make decisions about the approval and ongoing approval of programmes. In order to do this, they consider recommendations detailed in process reports, and any observations from education providers (if submitted). The Committee meets in public on a regular basis and their decisions are available to view [on our website](#).

### HCPC panel

We always appoint at least one partner visitor from the profession (inclusive of modality and / or entitlement, where applicable) with which the assessment is concerned. We also ensure that visitors are supported in their assessment by a member of the HCPC executive team. Details of the HCPC panel for this assessment are as follows:

Fiona McCullough	Dietitian
Sarah Illingworth	Dietitian
Rabie Sultan	HCPC executive

### Other groups involved in the virtual approval visit

There were other groups involved with the approval process as follows. Although we engage in collaborative scrutiny of programmes, we come to our decisions independently.

Lisa Harding	Independent chair (supplied by the education provider)	University of Winchester
Laura Tanter	Secretary (supplied by the education provider)	University of Winchester
Ruth Boocock	Professional Body Representative	British Dietetic Association
Menna Wyn-Wright	Professional Body Representative	British Dietetic Association

## Section 2: Programme details

Programme name	BSc (Hons) Nutrition and Dietetics
Mode of study	FT (Full time)
Profession	Dietitian
Proposed First intake	01 September 2021
Maximum learner cohort	Up to 12
Intakes per year	1
Assessment reference	APP02176

We undertook this assessment of a new programme proposed by the education provider via the approval process. This involved consideration of documentary evidence and a virtual approval visit, to consider whether the programme meet our standards for the first time.

## Section 3: Requirements to commence assessment

In order for us to progress with approval and monitoring assessments, we ask for certain evidence and information from education providers. The following is a list of evidence that we asked for through this process, and whether that evidence was provided. Education providers are also given the opportunity to include any further supporting evidence as part of their submission. Without a sufficient level of evidence, we need to consider whether we can proceed with the assessment. In this case, we decided that we were able to undertake our assessment with the evidence provided.

Type of evidence	Submitted	Comments
Completed education standards mapping document	Yes	
Information about the programme, including relevant policies and procedures, and contractual agreements	Yes	
Descriptions of how the programme delivers and assesses learning	Yes	
Proficiency standards mapping	Yes	
Information provided to applicants and learners	Yes	
Information for those involved with practice-based learning	Yes	
Information that shows how staff resources are sufficient for the delivery of the programme	Yes	
Internal quality monitoring documentation	Not Required	As this is a new programme that is yet to commence, this was not required

Due to the COVID-19 pandemic, the education provider decided to move this event to a virtual (or remote) approval visit. In the table below, we have noted the meeting held, along with reasons for not meeting certain groups (where applicable):

<b>Group</b>	<b>Met</b>	<b>Comments</b>
Learners	Yes	Met a range of learners from the Nursing, Physiotherapy, Sports and Science professions.
Service users and carers (and / or their representatives)	Not Required	We decided it was unnecessary to meet with this group, as visitors were satisfied with the information provided in the documents submission regarding service users and carer involvement
Facilities and resources	Not Required	As the visit was virtual and the visitors were able to determine through the programme documentation that many of the standards had been met, they decided it was unnecessary to have a virtual tour of the facilities and resources.
Senior staff	Yes	
Practice educators	Yes	
Programme team	Yes	

## Section 4: Outcome from first review

### **Recommendation of the visitors**

In considering the evidence provided by the education provider as part of the initial submission and at the virtual approval visit, the visitors' recommend that there was insufficient evidence to demonstrate that our standards are met at this time, but that the programme(s) should be approved subject to the conditions noted below being met.

### **Conditions**

Conditions are requirements that must be met before programmes can be approved. We set conditions when there is insufficient evidence that standards are met. The visitors were satisfied that a number of the standards are met at this stage. However, the visitors were not satisfied that there is evidence that demonstrates that the following standards are met, for the reasons detailed below.

We expect education providers to review the issues identified in this report, decide on any changes that they wish to make to programmes, and then provide any further evidence to demonstrate how they meet the conditions. We set a deadline for responding to the conditions of 05 February 2021.

### **3.6 There must be an effective process in place to ensure the availability and capacity of practice-based learning for all learners.**

**Condition:** The education provider must demonstrate that there is an effective process in place, to ensure the availability and capacity of practice-based learning for all learners on the programme.

**Reason:** The education provider stated in the mapping document that they are in regular conversation with practice education providers to discuss capacity and make formal agreements including placement numbers. The evidence submitted contained a summary of the discussions held during 'stakeholder engagement events'. The visitors noted that discussions included aspects such as curriculum, practice educator training, structure and timetabling of placements for the proposed programme. However, there was no information to suggest the process to determine availability and capacity of practice-based learning for all learners on this programme.

Prior to the visit, the education provider submitted additional evidence confirming partnership agreements with practice education providers, "Placement Capacity" and "Placement Management Process" documents. From their review of the "Placement Management Process" document, the visitors noted that the Placement Team within the Faculty of Health and Wellbeing has overall responsibility of managing practice-based learning for learners. It was also mentioned that placements will be sourced via existing links with current practice education provider partners and there is an intention to create partnerships with new ones. The visitors noted that the placement management process did not clearly explain the process to determine capacity as it only mentioned generic information regarding the importance of identifying and setting up new placements along with quality assurance mechanisms.

The practice educators informed the visitors that some of them currently take learners from the University of Surrey. They also confirmed that there has been collaboration between them, the University of Surrey and the University of Winchester to ensure all learners will have access to practice-based learning. It was also confirmed that these recent meetings include regular collaboration between practice education providers and the relevant leads from the respective education providers, to formalise an allocation process for all learners. The programme team mentioned that they have mapped their placement dates against the dates for the University of Surrey programme so that there will be no overlap. Additionally, the programme team also confirmed that they will have to undertake the same exercise with the University of Plymouth as all three education providers are operating within a similar geographical setting. The programme team also confirmed that they have managed to secure more placement agreements recently and have had meetings with the both local education providers to formalise a process to determine capacity. However this has slowed down in terms of progress due to COVID-19. The programme team mentioned there are some follow up meetings to take place in January 2021 with practice education providers and the two education providers, to decide and formalise the placements allocation process.

The visitors considered that there is the intention and progress has been made to determine the placement capacity process for learners on the proposed BSc (Hons) Nutrition and Dietetics programme. However, visitors have not seen any information regarding the recent meetings between the stakeholders that were mentioned at the visit. Additionally, without knowing what agreements and discussions will take place in January 2021 between the relevant stakeholders, it was not possible to make a judgement on whether learners on this programme will have access to practice-based learning. This is because the visitors could not determine how the allocation of placements from existing and new practice education provider partners will work, ensuring there is no overlap with learners from the University of Surrey and the University of Plymouth. As such, the visitors could not determine if this standard had been met because they could not determine what process will be in place to ensure the capacity and availability for all learners on this programme. The visitors therefore

require further evidence of the arrangements in place, along with details of the process that will be decided with the relevant practice education providers and the two education providers, to ensure availability and capacity of learners on this programme.